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BRIEF ESSAY ON THE MARINE DISEASE USUALLY TERMED "SEA-SICKNESS" (MARE MORBUS).

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[Communicated to the Medico-Chirurgical College of Philadelphia, and forwarded for publication to the Boston Medical and Surgical Journal.]

IN the numerous works possessed by the profession on the "Practice of Medicine," the malady, so far as I am able to judge, which stands at the head of this paper, is very commonly overlooked. Apparently it has been regarded with such indifference, as not to merit even a place in medical literature. Hence, its character being considered so trifling, no attempt has been made to inquire into its real nature, its mode of attack or operation, or to suggest any plan of scientific treatment for its speedy alleviation or cure. But it might be asked, is this silence about the matter doing justice to the interests or health of thousands—yea hundreds of thousands of mankind, whose avocations in every quarter of the globe expose them to one or more attacks of this truly trying, though temporary, affliction? For the sake of the bold, adventurous seamen, who navigate our ships across the high seas, amid storms and tempests or other fearful perils—for the sake of a large portion of commercial, scientific and other description of travellers—for the sake of that part of the fair sex and their young children, whose husbands or parents require them to undertake a voyage over the ocean—is it not time that the attention of the profession should be awakened, and invited to a consideration of this obscure though deeply interesting subject.

Why may it not be investigated? Why should that highly respectable body of medical practitioners—our naval physicians and surgeons—be left unprepared to combat with this particular form of *ship disease*? Nothing, in fact, is more common than for a physician to be consulted while at sea, as to what should be done for its removal. And yet how often will you hear it said, "*I can do nothing for you.*" The man of science is virtually struck dumb, as it were, because of the want of proper information, in relation to so common a marine complaint. If "*constipatio*" constitutes a disease, or, in other words, an abnormal state of the system, that is worthy of the attention of professional men, and is regularly noticed and treated of in the books on practice, surely "*sea-sickness*" is of equal if not more importance, so as to claim some

consideration from our distinguished professors, authors and lecturers generally on this department of useful medicine.

For these reasons now cursorily advanced, which to my mind are of obvious moment, I have been induced to watch its development, progress and termination, in a number of cases, besides experiencing it in my own person, during a voyage from the United States to Burmah, in south-eastern Asia. The passage occupied altogether 183 days, including detention at an African port—the ship having touched on the way out at the Cape of Good Hope, where she made a stay of nearly three weeks, in discharging cargo and fitting up again for sea.

Of all “the ills to which flesh is heir,” on board ship, there is nothing more extensively prevalent among both crew and passengers, than “*sea-sickness*,” and especially among those who are unaccustomed to “*sea life*.” During the period of its continuance, it is, comparatively speaking, far more distressing than are the ordinary run of maritime complaints. While it is present, it assumes and exhibits to all appearance the character of disease, and in some few cases, as happened with three or four ladies, it temporarily breaks down individual constitutions, and opens the road to more permanent and acknowledged affections.

In order, therefore, to a division and right apprehension of the subject, I propose considering it under four separate heads, as follows:—

First.—Let us consider the cause or causes of sea-sickness.

Second.—Notice the organs that seem to be implicated by it.

Third.—Its mode of development and symptoms.

Fourth.—Treatment—both hygienic and therapeutical.

Before entering upon a consideration of these enumerated divisions of a complex question, it seems befitting here to observe, that as the term “*sea-sickness*” is the vulgar appellation by which the disease is commonly known, I would respectfully submit to the “honored and experienced” in the profession, the propriety of its being properly designated by some suitable scientific name. Ought it, I might ask, to continue to be styled by that term, by the members of a liberal calling? Seeing no valid ground for it, and pending the decision of abler judges on the question, *I have simply ventured* to designate it as “*cephalo-gastro-rhœa*”—a name that is sufficiently significant, I imagine, of its location in the head and stomach, and of its involving partly the encephalon and seat of the origin of the nerves, as in the vertigo and sensation of reeling experienced, and partly as connected with the phenomena of the gastric function, as in the nausea or vomiting that may be present during the whole attack. If, however, any better appellation should be offered, I am free to say, that it should be at once adopted, in preference to a continuance of the existing embarrassment, arising from the fact of its being altogether nameless, in the received tables of nosology.

Let us now briefly consider the points indicated, as grouped under the different heads.

First.—The cause or causes of “*sea-sickness*.” These may be divided into primary, as the peculiar motion of the vessel; and secondary, as the breaking in upon the ordinary habits of the animal economy.

The first named is the antecedent, and the second the consequent, and both uniting set up a train of phenomena which characterize the state to be described under section third.

In a smooth, calm sea, where a ship is but little disturbed by either "winds or waves," it is generally found to be the case that but few, if any persons at all, are affected by this uncomfortable complaint denominated sea-sickness. In the novelty of the change which has taken place, from scenes on land to those that are usually encountered on the briny ocean, there is within us a mingling of dissimilar emotions, of which every novitiate in this new situation is more or less conscious. All is novelty, strangeness and wonder. And with some there is superadded, a strong feeling of loneliness, occasioned by a sudden separation from friends. When by the agitation of the swelling ocean, the turbulence of the dashing waves, or the pressure of a strong breeze, or storm, the "frail bark" rolls and pitches about with a quick, sudden, irregular motion, the accustomed habitude, or balance of the human system, so to speak, becomes interrupted. Man, a creature of the earth, then realizes that he is placed, as it were, in a new world of action, on a different element of nature from what he had lived and walked on all his life before. At this juncture he begins to feel somewhat indifferent to things around him, has a consciousness of personal helplessness, and sinks down into a dull disagreeable state of feeling. Sometimes the change steals over the sufferer so unconsciously, that before he has fully realized it, he is "sick and miserably bad," as some patients have expressed it.

In this class of causes, which, it has been noticed, produces functional derangements in the animal economy, though in the majority of cases only of a temporary kind, the rapid, irregular motion of the heaving ship appears to operate on the equilibrium of the "nervo-vascular forces" of the brain and nervous centres, so as to militate against their wonted regularity, and to disturb the quiet harmony of their action, and such as physiological laws would require under other circumstances, as when a person is pleasantly situated on land. Exposure, then, to the peculiar motion of a vessel, from the system not being trained or habituated to it, leads to changes that involve a condition different from that of health, and justly places it, during the presence of specified and known symptoms, in the catalogue of pathological affections incident to man.

Besides this change of situation from land to sea life, that at first breaks in on the ordinary routine of the system, there are other influences at work that tend to disarrange and to induce disease. These may be, in a word, comprehended under the following heads.

1st. The want of sufficient space, in most ships, in which to take exercise.

2d. Breathing at night, when sleeping below, or in confined cabins, air that is necessarily impure.

3d. Change of diet, of water, scenery and companions.

In addition to the motion of the ship referred to, and the derangement of accustomed habits, there are certain "smells" which are found in nearly all vessels, in a greater or less degree of intensity, that act in

the aspect of provocative agents. These are the effluvia emitted by quantities of tar, pitch, grease, old ropes, vermin (as rats, &c.) that may have died recently, and bilge water. The latter throws out a strong smell of sulphuretted hydrogen. They are so strongly offensive, at times, that it is impossible to conceal the fact of the dislike and disgust they excite in those exposed to them. May they not contribute to increase the tendency to nausea? Certainly they do.*

From these causes, then, operating either separately or unitedly, as just mentioned, it is easy to understand how the complaint is induced, and how the whole train of phenomena may perhaps be satisfactorily explained.

Secondly.—Let us now look for a few moments at the organs implicated by it.

In the preceding section it has been shown, that the brain, including the medulla oblongata, as giving rise to the several important nerves proceeding from the head to the chylopoietic viscera, is primarily disturbed by the ship's motion. The stomach, liver and intestinal tube, are more slowly involved in functional derangement, which by careful observation may be detected in all such cases. And though the disturbance or change which takes place in these organs, gives character to this disagreeable complaint, yet the effect produced upon them cannot be regarded in the light of an inflammatory or disintegrating action. Upon a close scrutiny, it partakes more of the nature of a modified form of congestion, acting in concert with a peculiar train of irritable phenomena of the nerves of the viscera, than of anything else with which it might be pathologically compared. The impression made on the "nervous system" is sufficiently characteristic to show the existence of general irritability in that great function, and to an instructed eye it aids in distinguishing a difference between its ordinary operation and condition while sound and tranquil in health, and that which marks the disease under consideration.

Thirdly.—Mode of development and symptoms.

The first indication of the approach of sea-sickness is a strange feeling in the head. The language of a little girl, who was asked to describe it, was—"my head swims." There is heaviness in the frontal and occipital regions, as if there was unusual fulness in those parts of the brain. In connection with vertigo, there is an indisposition for making either mental or bodily exertion. There is a general sensation of uneasiness all over the frame; and a strong desire is felt to seek relief from this unpleasantness by lying down. Nausea occurs, or, as the child expresses it, "my stomach is sick." Anything in the shape of food or drink, appears sickening and repulsive. A sense of soreness, approaching to the character of pain, is felt in the epigastric region. The skin is slightly warm and moist. The palmar surface of the hands and feet is sometimes hot and dry. Pulse is accelerated. Tongue

* On the recurrence of rough weather, there is a liability to a return of this complaint a second, third, fourth, and even a fifth time, in the course of a six months' voyage. No sooner does the vessel begin to move suddenly and rapidly, rolling and pitching about, than the whole organism experiences once more the very undesirable symptoms of a change.

white or brown, and is occasionally furred. More or less vomiting occurs. At times it is excessive, and accompanied by considerable retching, which is most distressing to persons of a feeble or slender constitution. The last meal which may have been taken, several hours or even a day before, comes up undigested. And by subsequent efforts, fluids of one kind or other, with any remaining ingesta mixed up with saliva and mucus from the fauces, are ejected; and lastly there appears some bilious matter, streaked, now and then, in a few cases, with blood. The taste imparted by these substances to the mouth, is exceedingly bitter. When destitute of bile, as they sometimes are, the fluids thrown up have an acid re-action and smell sour. The bowels are generally very torpid. If there have been any evacuation of this sort, it is mostly of a scybalous nature, scanty and very unsatisfactory. It not unfrequently happens, however, that there is a simultaneous action of both stomach and bowels at the same time, and in both directions the discharges may be free. The state of the mind is depressed and fitful. It longs to be in a position of quietude. If there be one thing more than another desired by such patients, it is to be away, far away from the heaving billows, and laid quietly on some "green spot" of land, where both spirit and body might be at rest. The dreadful feelings that are endured would be a fruitful theme for the pen of a poet; and rather than have them protracted, the sufferer will exclaim, "would that I were flung on shore anywhere, that I might get relief." This is no fanciful coloring of the subject. The picture is true to life, as every one well knows who has passed through the ordeal of a rough passage over the ocean.

Fourthly.—Treatment—hygienic and therapeutical.

The chief remedy in use among professional and non-professional men, for the relief sea-sickness, is exposure in the open air on deck. Nothing is so good for it, is the commonly-received opinion of all classes, whether sailors or landsmen. In this popular observation, it must be remarked that there is something which accords both with reason and the principles of sound philosophy. Pure air is so essential to health and life, that all appear to be acquainted with the fact. Hence the question arises, what animal can live where it is impure, and continue in a good state of health? Hence the prescription, which is so frequently given in these cases, "go on deck into the pure air." There seems to be a natural aversion in the human breast—which is just as instinctive as it is to recoil back from the presence of a snake—to enter a confined, dark or damp situation, much less to remain in it for any considerable period, unless forced to do so by the pressure of circumstances. To gratify an eager curiosity, or a conscientious sense of duty, or a desire to exhibit personal courage before others, will induce men, on many occasions during life, to act contrary to the instincts of their nature, which instincts are imparted, or planted in us, as a means of "self-preservation." If they did not constitute a part of our nature, the fact at least would be one step towards establishing the "ideal theory" of the celebrated Bishop Berkeley. Briefly, then, I need to remark, that the hygiene consists of free ventilation, a proper quantity of light, and atten-

tion to personal cleanliness and comfort. The subject of making a rational provision, in the construction of vessels which navigate the high seas, for air, light and bathing, is worthy the attention of every physiologist, philanthropic and statesman in the world. Their voice should be heard on this question; and if heard, it would produce some salutary changes and improvements in the existing style of naval architecture.

In relation to the other branch of treatment proposed, it is necessary to observe, that there are various therapeutical agents that have been employed, often with success, though sometimes without any satisfaction whatever, which need here to be mentioned, with the probability of success, or failure, attending or resulting from their administration.

To show, however, as has been often done before, that no single agent can be implicitly relied on in this or in any other complaint, notwithstanding the amount of praise it may receive, the following particulars are given.

Just as the "Washington Allston" was being loosed from her fastenings, at one of the wharves in Boston, a gentleman, whose silvered hairs and placid eye spoke of the flight of many years and the benevolence of his heart, stepped on board, and understanding me to be a medical man, whispered in my ear and said that he thought we should have a great deal of sea-sickness among our company, as there were several ladies and a number of young children among them, and advised me strongly to try "morphia" in all such cases; that he had great experience of "sea life," and had tried the medicine with the happiest effects. According to this suggestion from the venerable man, and he may have been a physician for all I know to the contrary, I employed it in three cases, giving the sulphate of that article in the proportion of one sixth to one fourth of a grain in powder, mixed with a little sugar. This dose I placed upon the tongue, with some drink to wash it down. In one case it afforded relief; in the other two it had no effect beyond causing a sense of drowsiness for two or three hours.

As experiment is a governing "law" in medicine, it becomes both physician and patient to be obedient unto law. Thus, anything which holds out a hope of being serviceable, must be tried. Accordingly, effervescing draughts, aromatic drinks, stimulants, as a spoonful of brandy with water, or a couple of ounces of wine, have each been used, though only with temporary benefit. A ginger plaster and mustard sinapism were applied to the region of the epigastrium, with a similar result.

The principal indication, however, seems to be to clear out the bowels. Till this is done, the prospect of affording permanent relief is faint indeed. For this reason it is that sailors are in the habit of dosing themselves with "sea-water." They take from half a pint to a pint of it at one time. It generally produces the desired effect, and removes their difficulties without further trouble. But as all persons, and more especially ladies and children, cannot swallow so large and so nauseous a dose, other things must be selected from the medicine chest. The compound extract of colocynth, combined with a small quantity of blue mass, has uniformly proved, in these cases, a good cathartic. As the two articles thus blended act more particularly on the liver, and on the

lower part of the large intestines, where the lumpy portion of the feces accumulates, these appear to be as useful as anything else that can be administered. If it be not sufficiently active at first, it is advisable to repeat it, or to follow it up by an ordinary dose of castor oil or the sulphate of magnesia. When the "alimentary canal" is thus cleared out, a sedative, as morphia or opium, will restore tranquillity to the system, and help to promote a cure. In obstinate costiveness, the employment of laxative enemata would of course be advantageous, or a drop of croton oil made up into a pill with a crumb of bread.

In children, doses of rhubarb and magnesia, or rhubarb and calomel, or the compound powder of jalap given in any suitable vehicle, will in general remove obstruction from the *prima viæ*, and make the little ones "look bright as ever."

With a sincere desire that these observations may *do good*, I now commend the subject to the indulgent attention of my medical brethren.

DENTAL AMALGAMS.

Bastard.—But there is little reason in your grief;

Therefore 'twere reason, you had manners now.

Hubert.—Do but hear me, sir.

Bastard.—Ha! I'll tell thee what;

Thou art damn'd as black, nay nothing is so black,

Thou art more deep damn'd than prince Lucifer.—*KING JOHN.*

To the Editor of the Boston Medical and Surgical Journal.

SIR,—Like the poor berated innocent Hubert, I request, "Do but hear me, sir," in the simple cause of pathological truth; promising to trouble you no more on the subject of dental amalgams. With your kind permission I would like, for the purpose of elucidating several points, to place upon a right scent my distinguished cotemporary, but who simply subscribes his name—J. F. Flagg, M.D., No. 31 Winter street, Boston, to an article published in your Journal of the 4th instant, the tenor of which was directed to you, upon the merits of "mercurial compounds for filling teeth," but which, in fact, was a reply to my letter on "Dental Amalgams," published in your Journal on the 14th ultimo. Dr. Flagg says in his letter, "I am not willing that such an article (Dr. Castle's) should have the aid of your Journal to disseminate doctrines"! &c. I would beg to say, that I did not advance one single idea in my article as a "doctrine"! I gave to the world true incontrovertible *facts*, with which you had no more to do, than you had with the original article published in the Baltimore Dental Times, but which you published, induced, no doubt, from that spirit of "fair play" which has always characterized your conduct in your editorial position and capacity. Dr. Flagg says—that I (*Dr. Castle*) "*have seen already the amount of what he (Dr. Flagg) has to offer on the subject.*" What Dr. Flagg may have to offer, I know not, and care little; but this I can assure the readers of your Journal, *that if one breath alone remained to me*, to give utterance before my soul winged its flight into

eternity, I could conscientiously state my experience, that I have never seen any injurious effects, constitutionally or locally, in any one individual whose teeth has been filled with pure gold or silver amalgams. Peculiarly, it is of little moment to me whether the patient have his teeth filled with gold, silver, tin, or *amalgams*. In my medico-surgical practice, as applied to the true pathology of the teeth, I shall avail myself—which common sense dictates—of twenty-five years' observation upon correct experience, which recommends the various materials of gold ! tin !! and amalgams !!! for the preservation of the teeth, in accordance with their physical peculiarities, as they are found in the various diatheses of different constitutions. This *important point* in my dental practice I shall satisfactorily illustrate to the medical reader and to the dental profession in my notes upon Dento-neuralgic Affections. Dr. Flagg may have seen much disease in teeth filled with amalgams ; as amalgam is often put into teeth, because no other material in such cases can be used. But Dr. F. has never—and he says he never will—use amalgams in his practice. Is Dr. Flagg, under such circumstances, capable of judging or sitting in judgment upon this compound ? Do people go to dentists or to Dr. Flagg because their teeth are satisfactory to themselves ? As well might the poor cobbler, hammering upon his lapstone, exclaim—I *have no faith in leather*, shoe-makers and boot-makers are dishonest, their leather does not protect the toes and feet from *corns*, “hard” or “soft,” nor do their boots and shoes prevent the toe-nails growing into the flesh, or prevent people “taking colds ;” *ergo*, boot and shoe-makers are dishonest : but cobblers ! with *their wax and thread*, are “all honorable men.” I fear that Dr. Flagg will have to stand on *that “watch tower”* for a long period, exercising the instinctive “cry” of himself and his friends the immortal council of eight anti-amalgamists—“*beware of the enemy*” ! before he can make your readers believe that their or his own simple denunciations are either arguments or proofs of the pernicious properties of dental amalgams. Dr. Flagg says—“*I have scarcely passed a week during many years since this obnoxious article was introduced, without witnessing some of its injurious effects.*” Yet Dr. Flagg has been, all this period, standing on his “watch tower” ! at least since 1847, and his “voice was never heard.” Philanthropically inclined as I feel, I would relieve Dr. Flagg from his painful position on the “watch tower,” and propose to him an easier mode of crying “beware of the enemy.” To Dr. F. and those gentlemen with him—Dr. Parmly of this city, and Dr. Harris of Baltimore—who have seen “so much misery,” and such “pernicious effects” for the last twelve years produced by its presence in the teeth of patients consulting them, I would suggest to call the attention of the Warrens, the Motts, F. U. Johnson, &c., the professors of the medical colleges of their several places, to this “poisonous material” ! and its poisonous, injurious effects on the teeth, the health and the constitutions of the thousands daily availing themselves of its application to their teeth. Would not those apostles of Hygeia, and Minerva who sometimes wielded the *thunderbolt* of her father Jupiter—upon the sanitary principles of public health, and still more as the guardians of those

who especially place themselves under their professional care in their sacred and confidential capacity and character of "family physician"—would not these gentlemen under such circumstances warn their friends and patients to "beware of the enemy"? Would not our Gamaliels, in the many temples devoted to Hygeia, be too happy in their teachings, upon being made acquainted and *practically satisfied* with the facts! of the vast, *continuous*, wide-spread, devastating effects produced upon the constitutions, the health and the teeth of the many thousands upon thousands, whose cases would ultimately be brought under the charge of their numerous medical classes, when from their transition embryo state they had fledged into veritable M.D.'s—I repeat, should not these gentlemen deem it to be their religious and moral duty, really from *their* "watch towers" to warn the medical student of this dishonest, this outrageous mal-practice (if founded in truth) of the "amalgam dentists"? Would they not prepare the student's mind for the consequent and the *peculiar* abnormal condition of local and constitutional difficulties with which they would have to contend, and upon which they would have to make deductions from new *diagnostic* marks in connection with disease? Truth is great, and it must prevail. Denunciations do not comprise *truth*, nor are they *proofs*; but they are more easy, more practicable, more likely *ad captandum* to impress the unthinking, than the professional, the dignified, the truthful, and the correct mode I have proposed above, to prove their own "doctrines" and to expose their own stultified dogmas.

Dr. Flagg having hung his "banner" on the outward wall of his "watch tower" or castle, says, "What I have said is not to be understood as entering into any controversy with the writer" (Dr. Castle). O dear, no. Dr. Flagg need labor under no apprehension that his simple denunciation will be mistaken for a "controversy." I must, however, applaud the self-denial and the self-respect of Dr. F.'s repudiation of any such idea; feeling assured, as I do, that if the remotest chance offered itself, or if there existed the slightest *resemblance* to any kind of truth in the assertion, "*that scarcely a week passed during many years that he [Dr. Flagg] did not witness some of the injurious effects* resulting from the exhibition of dental amalgams in decayed teeth, Dr. J. F. Flagg, as well as his friend Dr. Eleazer Parmly of this city, and the Baltimore College of Dentistry and "Times," would singly be too happy, and combined too eager to avail themselves of such *demonstrative facts*, in contradistinction to fifteen years of unprofitable controversies and endless ridiculous recriminations! especially with such opportunities as Dr. Flagg offers of demonstrating the mental *cachexia* of their professional amalgam opponents. No! indeed, such seasonable chances would afford luxuries too *gold-en* to be readily lost sight of.

In volume 36, July 21, 1847, of your Journal, Dr. J. F. Flagg, on the subject of dental amalgams, says, "I hold them to be injurious in their effects, and though in some instances *they remain for a long time and appear to be harmless*, they do in all such fall short of gold in effecting the preservation of the teeth." Again, "Although cases do occur in which I am led to judge that I might do some temporary ser-

vice, with but little if any [!] risk of injury, by making use of them, I am still determined not to have my name connected with such an operation." Now I would ask, how can Dr. J. F. Flagg reconcile his statement respecting the demonstrated superiority of gold fillings, in the worst cases that occur, where an operation can be relied on (why, any material is good if it can be *relied on*)—with the statement made in the Boston Medical and Surgical Journal, Vol. 35, page 527, wherein Dr. Flagg of Philadelphia states that he and his brother in one year bored! (tapped?) into two hundred teeth filled with gold!! to let forth the pus, in these numerous cases of intro-dental abscesses.

I would here again provoke, as well as challenge, any anti-amalgam dentist to produce *properly medical authenticated* cases of constitutional irritation or local injuries done to the teeth, alveoli, maxillary bones, or the mouth, or to the teeth alone, unless the filling has mechanically pressed on a living nerve, or where chronic periostitis has been super-induced by the corrosive agency of arsenic, and which has been attributed to amalgams. I will make this offer. To every five dentists, whose practice, individually, does not exceed my own, for each tooth they will produce, said to be injured, poisoned or destroyed by a pure amalgam, I will exhibit a tooth—tooth for tooth—filled with gold, as well as those which have never been filled, presenting *precisely* the same physical appearance, abnormal condition, or in a state of necrosis or death. I will show, by Harris's Dictionary of Dental Science, that these anti-amalgamists do not know how to prepare amalgams, or what their properties are. To wit, this Dictionary first says an alveoli abscess is a *gum-bile*. I was always taught that bile! was secreted from the liver. "*Castings*," or metallic models for making artificial teeth, are placed as a branch of "*dental surgery*." And under the word *amalgam*, it says, "Within the last few years an amalgam of mercury and silver, either alone or in combination with finely-pulverized silver [?], *glass* [!], or *pumice* stone, has been used by many dentists." Now this knowledge of the cohesion of opposites, or such queer chemical combinations, is amusing, as it proves authoritatively how little these gentlemen know of a material which they have never used. I will only add that Dr. E. Parmly, the champion of the anti-amalgamists in this city, says, page 79, vol. 37, of your Journal (stated by Dr. Ware), "I would here own the merit of F. H. Clark, Esq., in stopping teeth with it (mineral paste), which I had failed to secure with gold. *There are many such.*" Dated May 31, 1847, at No. 1 Bond st., New York. If this certificate from Dr. Parmly be not sufficient, I will produce—after these gentlemen shall *have proved* the injurious effects of dental amalgams—many individuals in this city, distinguished for their respectability and social relations, who sixteen years since and upwards applied to Dr. Parmly to have teeth filled with gold, but which he stated to be beyond hope of redemption, and advised their extraction. *Th same teeth at the same time I filled with amalgam, and they remain permanently useful to this hour!* A pertinent question I would put to these gentlemen. If gold possess such wonderful preservative properties, how is it so many persons commence with the filling of a single

tooth, through all the gradation of numbers, finally to wear an artificial set of teeth? and that, too, long, very long before the period of "green old age."

In conclusion, soon after Dr. Parmly declared so fearlessly in the Tribune (N. Y.), May 28, 1847, that he "had no confidence in the integrity of those dentists who use amalgams," his friend Dr. Lovejoy, of this city, called upon him, and demanded if he meant to include him in that sweeping clause. "By no means, my friend," was Dr. Parmly's reply; "if all used it as you do, I would not have one word to say." In Dental Recorder, Dr. Parmly has also been standing on that "watch tower," for the last fifteen years, from which the two gentlemen have done nothing more than *denounce*. I would advise them to "cry

"Hang out our banners on the outward walls;
The cry is still they come; our castle's strength
Will laugh a siege to scorn," &c.

Or they may still continue to exclaim, in their own peculiar vernacular—*reductio ad absurdum*—"Beware of the enemy."

If the above-named gentlemen can by any opportunity practically exhibit that properly-prepared *dental amalgams* are in any way injurious, I will prove my sincerity, and show my hand first as being in error. If the above gentlemen can show a tithe of the majority of the professional brethren to be "dishonest quacks," pseudo-dentists, and guilty of imposition upon their patients' pockets as well as health by the use of amalgams, I will say with them—

"Put in every honest hand a whip
To lash the rascal naked through the world,
Even from the East to the West."

Very respectfully,

New York, Feb. 14, 1852.

A. C. CASTLE.

CASE OF NEURALGIA OF THE HEAD.

[Communicated for the Boston Medical and Surgical Journal.]

THE following is a case of neuralgia or tic douloureux of the head, which was successfully treated by me in the year 1834, since which no recurrence of the complaint has taken place up to the present time. What gives additional interest to this case, is the fact that for more than a year previous to my seeing it, the treatment that had been resorted to had not given the slightest relief, in consequence of a wrong diagnosis, and the adoption of a course of treatment not warranted in the case.

September, 1832.—Nathaniel Jarvis, Esq. aged 47, a native of New York, who had previously enjoyed unusual good health, was attacked with severe pain in the head over the forehead and temples. This was at first thought to be only an ordinary case of nervous headache, and the domestic remedies were resorted to which are usual in such cases, but without benefit, the pain gradually increasing, accompanied with darting pains and twitching of the nerves, which became so excruciating as to render him almost blind. He now sent for a physician and placed himself under his treatment; but not being in any way relieved, two other

physicians were also called in. I am not acquainted with the treatment resorted to, other than he stated to me that he was leeches, cupped, and continually blistered, and also kept constantly under the action of narcotics of various kinds. On a consultation, his case was pronounced enlargement of the bones of the head, and an operation was determined on. The forehead was slightly swollen and inflamed. What was the nature of the operation intended, or its object, I have no means of knowing—as the operation having been commenced with an incision of such a nature as to enable them to observe the bone, it was found to be perfectly healthy, no disorganization having taken place, and the operation was then abandoned. He was treated after this for neuralgia, but without benefit, and was kept almost in a state of stupefaction with morphine. He placed himself from time to time under the treatment of other physicians, but with no better success. He then made a voyage to New Orleans, in hopes that change of air might have a beneficial effect, but he returned to New York even in a worse condition than when he left. On his arrival he called on the late Dr. Bush. After relating his case and what had been done for him, Dr. B. declined doing anything for him, but recommended him to call on me.

I first saw him October, 1834. He had now been suffering, without intermission, excruciating pain from the time he was first attacked. He had only momentary relief while under the action of morphine in such doses as under ordinary circumstances would have been attended with danger. On examining him I felt satisfied that his case was neuralgia or *tic douloureux*, involving the ramifications of the fifth pair of nerves. He was nearly blind, and his whole nervous system was in a state of great irritation from his long and severe suffering. His appetite was miserable, his digestion bad, bowels torpid and constipated, his urine very scant and high colored, and his bodily strength greatly reduced. Previous to this I had had several similar cases, and having successfully treated them I determined to adopt the same principles of practice in this case as I had done before, viz., to produce paralysis of the whole nervous system, and temporarily suspend the action of the heart and circulation, then restore the circulation again and the nervous energy, only keeping the nerves which were the seat of the disease in a state of paralysis by local applications over them, and by the internal use of such remedies as act on the nervous system generally. The functions of the stomach, bowels and kidneys in the mean time to be restored, and the general tone of the muscular system to be strengthened by proper tonics, &c.

To carry out this intention, I first ordered his head to be shaved in order that I might be able to make such applications to it as would arrest the tendency to congestion consequent on the treatment to be adopted. The head having been shaved and a wig procured, I prepared the following and administered it to him myself. R. Acid hydrocyanic (Schiel's preparation) *minim ij.*; aqua, *℥ ss.* M. I carefully watched its effects. Faintness and nervous prostration gradually came on, the pulse sank and the heart almost ceased to beat. When the effects of the acid had been carried as far as I deemed prudent and safe, I ad-

ministered to him—*R. Aqua ammonia* (pure and concentrated), gttss. *xx.*; *aqua*, ʒ j. *M.* Dose, a tablespoonful frequently repeated; causing him also to freely inhale the concentrated ammonia by the mouth and nostrils. His head was also freely bathed with a stimulating evaporating lotion, composed of alcohol, strong French vinegar, and water, equal parts of each. Re-action in a few moments took place; the pulsation of the heart was restored, the pulse rose, and consciousness soon returned. The nervous system, however, remained in a great measure in a state of prostration. In order to keep the affected nerves in a state of paralysis, I prepared the following ointment, which was rubbed over the seat of pain till it became benumbed, and it was renewed from time to time to keep it in that state. *R. Veratria*, gr. *xx.*; *axung.*, ʒ j. *M et st. unguentum.* In order, also, to equalize the nervous system, I gave the following pills:—*R. Ext. belladonna*, gr. *x.*; *ext. stramonii*, gr. *x.*; *ext. hyosciamus*, ʒ j. ; *ext. valeriana*, ʒ j. ; *oxide zinci*, ʒ j. *M. Fit. pil. no. 75.* Dose, commence with one pill for the first day, and then increase one pill a-day to each dose, till they produced enlargement of the pupil, &c., when cease taking the pills for two or three days, and then commence with them as before, one pill the first day. I entirely deprived him of the use of morphine or any other opiates, but as a substitute gave him pills of lupuline in doses of gr. *vj.* to gr. *x.* as occasion required, and gave him the following tea as a general drink. *R. Rad. valerian* (German), fol. *hepatica Americana*, humuli, flores *filix*, āā ʒ ij. , infused in one quart boiling water.

Under this treatment he experienced almost immediate relief, and following it up for a few days, sensibly diminished the pain, and the nerves being in a partial state of paralysis ceased their twitching and painful motions, and he was now able to obtain something like natural sleep, which he had not had since the commencement of the attack. My object being to keep the nerves for some time in a partial state of paralysis, I again repeated the acid hydrocyanic, but in the dose of one drop only; this produced the effect of quieting the action of the nerves, which had again nearly assumed their natural tone. I also substituted for the veratrine ointment the following:—*R. Ext. aconita concentrate*, grs. *viii.*; *axung.*, ʒ j. , and applied it over the seat of the pain, continuing the pills and tea as before. After following up this treatment for a few weeks, all pain and irritation of the nerves had entirely ceased; he slept soundly and naturally; his bowels, which had been regulated by gentle medicine, were now regular, appetite good, and he was apparently well. But in order to be sure and have no relapse, I kept him under the action of the tea and the pills for a few weeks longer, when I discharged him as cured. He has had no relapse of this complaint, or been ill in any other way, up to the present time. Since his recovery he has held the office of Alderman of 12th ward of the city of New York during the years 1839, 40 and 41, and county clerk for the county of New York during the years 1842, 43 and 44. He now commands the steamship Pacific, running on the Pacific Ocean to San Francisco, in Vanderbilt's line of California steam ships, and is a strong, hale and hearty man.

Yours respectfully. J. X. CHABERT, M.D.

No. 431 Grand st., New York, Jan. 17, 1852.

PHOSPHATE OF LIME AND COD-LIVER OIL IN PHTHISIS.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—The editorial statement (in your number for March 3) of a case which had been benefited by the use of phosphate of lime and liver oil, is very interesting; but it is calculated to mislead and excite false hopes, unless the reader takes into consideration the physical signs as well as the rational. Prior to stating the physical signs, I wish to say that it is true that all the rational signs have improved as you stated. Some, such as the hectic fever, poor appetite, pains in the chest, &c., have wholly disappeared; others remain, but are much less manifest. The whole aspect of the youth is wholly different from what it was either in June or November, 1851, at which times I saw him in consultation with his attending physician. In June, the physical signs were as follows. Percussion and voice good everywhere. The respiratory murmur was a little louder in the upper third of the left lung, front and back, than in the corresponding parts of the right, and occasionally, on a full breath, after coughing, I heard a distinct sonorous rale, *limited wholly to this same upper lobe*. From the rational signs and these slight physical ones, I inferred the existence of tubercles, *sparsely* disseminated in the part. Notes to this effect were made at that time.

In November, all the rational signs were much worse, and he was in the condition you mention in your editorial, as existing before the use of the oil and lime. He had likewise suffered from hæmoptysis. The physical signs were augmented, and there was distinct crackling with every inspiration over the space above named. Finally, since your editorial, I have examined the patient again, and I find that *notwithstanding the improvement in the rational signs, the physical signs have augmented*, as the following statement will prove.

Percussion, *flat* over the whole of the left breast, and at the top of both backs more dull than usual. Tubular respiration, with coarse crackling down to the fifth rib in the left breast, with great resonance of the voice. Behind, there is crackling even to the base of the left lung, but it is less at the bottom than at the top. The murmur is less throughout this lung than in the right. The right lung has a little more resonance of the voice at its top than is usual; but generally it is wholly free and seems quite healthy.

I infer, therefore, that the tubercular disease has really augmented, but the extra quantity of nutriment administered by the oil overcomes the natural tendency to emaciation and improves all the functions of the system, in spite of the gradually augmenting physical disease. This may seem strange; but it is not a unique case in my own, and I presume is not so in the practice of others. I have now a young man who has gone through the fattening process to so great a degree that it was rather disagreeable to look at his face. It seemed as if the oil would *exclude* from it! All the symptoms improved, and the friends could not believe that he was doomed to a fatal complaint. I could not, however, give encouragement while I found such physical signs. My fears have proved but too true. The oil and lime now disquiet him, and he is

failing fast. Nevertheless, I have advised the renewed use of the oil, with the more perfectly prepared lime of Mr. White. I would fain *hope* for good, but my *reason* teaches me that from the course the disease has already followed, the *probabilities* are that it will continue to progress, and that there is little chance of recovery. Such, I fear, will be the result in the case alluded to by yourself.

It is very unpleasant to me thus to suggest doubts as to the beneficial results of our new remedies. Cod-liver oil has acted, in my practice, with a power that no other remedy has possessed; but I fear that we have not yet discovered a remedy that will certainly cure all cases of phthisis. I have entire faith, however, that at some future time a remedial or preventive course of treatment will be established, which will check that terrible disease in decimating the world as it does at present.

Yours respectfully,

Boston, March 11, 1852.

HENRY I. BOWDITCH.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, MARCH 17, 1852.

Proposed Re-organization of the American Medical Association.—At a meeting of the Philadelphia County Medical Society, in February, Samuel Jackson, M.D., the President, read a paper which must have created a sensation among the members, as it is well calculated to do in the profession generally. A note says it "was not discussed by the Society, owing *probably* to the lateness of the hour." The fact is apparent that the man who dare stand up before the Philadelphia physicians and declare, without qualification, that "*The American Medical Association is not a republican institution—it is aristocratical, both in its origin and in its continuance,*" is either a bold fault-finder, or too independent for the corrupt age in which he lives. Dr. Jackson has cut a wide swath, in rural language, and absolutely mown down—so far as exposure can do it—a hecatomb of absurdities that surround and hedge in the usefulness of our great National Association. He sees, as have others who had not the courage to proclaim it from the housetops, that it is a machine controlled by a select few, who ascend on one side of the revolving wheel, while, Juggernaut-like, the masses constituting the ideal sovereignty of American medical science, are hidden if not crushed into oblivion by it. Dr. Jackson proposes a remedy for the difficulty, and one that may be considered necessary for the safety of the Association. He suggests that the Association consist of delegates from County Societies only. After pointing out the abuses that will spring up under the present organization, and showing how completely it is in essence a close corporation, in which friends play into each other's hands, he leisurely and logically proceeds to show a process by which a re-organization may be readily brought about, that shall harmonize with the genius of our institutions, and thus it may become, as was originally intended, a blessing to the United States. Had Dr. Jackson been a smaller man in calibre, he would be speedily annihilated by those who will find themselves circumscribed in their projects of

ambition; but, under the aspect in which he presents himself, the only safe retreat is to fall in with his views, as he will doubtless have immense majority of the profession with him.

The following brief extract will show the organization which Dr. J. proposes, and also the able manner in which the subject is handled by him.

"1. Let the Association be composed of Delegates from County Societies only.

"2. Let every man receive, as soon as he is elected into his County Society, a diploma, testifying that he is a member of said County Society, of the State Society, and of the American Medical Association. He is then one of the great body of the brethren in the United States; he is ready to be elected a delegate whenever his fellows see fit to elect him; he is ready to give his vote in the election of others; he is now a member of the great medical republic of his country. He therefore values his diploma from the County Society more than that from the University; for the latter only testifies that he is a Doctor of Medicine, the former makes known that in addition to this, he is now a respectable citizen, a practitioner in good repute, and a member of the American Medical Association. 'Tis true, he may never be made a delegate, time and chance happeneth to all men; he may not even desire this honor, but he is not less a member of the Association because he may never sit in their meetings. We are not less citizens of the United States because we have not been delegated to Congress; we are citizens of Pennsylvania, contributing to and partaking in its government, though never deputed as legislators. We are Episcopalians, Presbyterians or Methodists, as soon as we are formally admitted into these churches, though we may never be sent to their Conventions.

"Do you call this nothing? But all others consider it of great importance to their happiness. See how eagerly the young man of 21 years runs to the polls; see how impatient are foreigners for naturalization, that they too may vote for legislators, when they have no hope of becoming such themselves. The members of County Societies may give their instructions to their delegates; this little privilege is highly valued in politics, why should it not be in medicine?"

Progress of Imposition.—Boston has been celebrated for its notions—but a mania, which is in the ascendant at this particular moment, far excels all preceding ones in point of absurdity. Both men and women, of reputed intelligence, who have heretofore been sane in all the common affairs of life, are making themselves and the city ridiculous by suffering their reason to be dethroned by the rapping furor. Many of them will bear no intimations that run counter to their individual opinions on spirit intercourse. We witnessed the hysterical anger of a very accomplished young lady, from a neighboring city, last week, who shed tears abundantly because a gentleman presumed to denounce a boy-medium who was imposing upon her in the grossest manner by his pretended intercourse with the spirit of his defunct grandfather. She said it was a shame and a disgrace to proclaim as a knave an innocent little boy, who could have no motive for deception! And yet the arch fellow had secretiveness and knavery as plainly written on his head, as the exactest laws of phrenology demand. But still she wept with vexation and imagined insult—for it was evident there was a pleasure to her in being deceived. This is but a

solitary illustration of the progress of the rapping delusion in our city. It has not yet reached the culminating point—nor will it abate till the shafts of ridicule fly thickly and pointedly; for reasoning with the victims is perfectly hopeless, since many of them have no reason left. Dr. Underhill's farcical exhibition of himself in the midst of a convention of rappers at Cleaveland, Ohio, must have been a sickening exhibition. Perhaps, however, it is as well to laugh as to cry over the absurdities of mankind. One folly succeeds another in rapid succession; and those who would naturally be supposed, from their social position, education and mental training, the strongest bulwarks against the extension of delusions like this, sometimes prove themselves the main props to support them.

Phosphate of Lime.—Mr. Samuel Kidder, a careful, reliable apothecary, of Charlestown, has prepared some of the phosphate of lime, in accordance with the views of physicians, by reducing it to an impalpable powder, for the use of consumptives. Those who have read of the success of this new treatment, and have any disposition to resort to it, would find it more satisfactory to have a good article, than to lose time by the administration of an impure one. Mr. Kidder's experience in his own family has convinced him that much of the value of the phosphate depends on its fineness; and if some have been unsuccessful with it, possibly by reducing every dose to an impalpable powder they may produce entirely different results. Such is the simplicity and feasibility of the experiment, that it is really worthy of repetition by practitioners. Dr. Bowditch's remarks in to-day's Journal, which apply, however, more to cod-liver oil than the lime, are worthy of attention.

History of the Art of Midwifery.—Augustus K. Gardner, M.D., of New York, gave a lecture at the College of Physicians and Surgeons, introductory to a course of private instruction on Operative Midwifery, intended in part to show the past inefficiency and present alleged incapacity of females in the practice of obstetrics. Dr. Gardner stands in no fear of anathemas from the advocates of female medical colleges, otherwise he would have been more reserved in his condemnation of the new order of physicians now springing up among us. If some of the female professors should fall upon him, it is uncertain what would be his fate. Of course they will take all his prelections in high dudgeon, and hold him up as one opposed to the progress of the age and woman's rights. The lecture is, however, a sensible, straight-forward and instructive one. Every line of its historical memoranda is particularly interesting. Very few have the faculty of compressing so many facts into a few paragraphs. Of the great importance of anæsthesia in labor he bears testimony, and emphatically advances the belief that *before this generation has passed away*, labor will be "*rendered a painless and every-day occurrence.*" Medical writers generally, in our day, relate the views of others, and rarely hazard an opinion of their own. Dr. Gardner will not suffer under this imputation, for he says precisely what he thinks, and in his own way. There is neither concealment nor hypocrisy in his writings.

Medical Improvements—Dr. Williams's Address.—Dr. Williams's discourse before the Franklin (Mass.) Medical Society, has been read

with much satisfaction. He is an admirable chronicler and one of the most industrious, worthy members of the profession in New England. Had the paper not been published in a neighboring Journal, it would have gratified us to copy liberally into our pages; but courtesy forbids it.

Artificial Breast.—An improvement has been made in the lacteal invented some years since by Dr. Windship, of Roxbury, that will be appreciated by mothers and wet nurses. It is a glass imitation breast, with an India-rubber nipple. The infant would thrive with it—and its contrivance is such that it may be worn and the child nursed in the common manner, so as to deceive even an observing spectator. Physicians will find the article in all the respectable apothecary stores of Boston. The proprietors are Messrs. Marsh & Loomis, of Roxbury.

Canada Medical Journal.—We little expected, when recording, a few weeks since, the demise of the British-American Medical Journal, that from its ashes would so soon arise a new candidate for professional patronage. But such is the case, and there is now lying before us No. 1 of a monthly periodical with the above name, fair-looking and lively, and with every apparent promise of a long and vigorous career of usefulness. Drs. R. L. Macdonnell and A. H. David, both of whom are connected with St. Patrick's Hospital and the St. Lawrence School of Medicine, are the editors. They appeal to the medical profession in the two provinces for a support sufficient to cover the expenses of the work, and we hope their modest appeal will be favorably responded to. It is published at Montreal, at \$3 a year. Several of the articles in this number are printed in the French language.

Medical School of Harvard University.—We understand that twenty-five gentlemen were examined and approved for the Medical Degree, at the close of the course of lectures just finished, making nearly forty graduates from this School during the year. The names will be given when the diplomas shall have been awarded by the President and Fellows of the University.

Boston Bill of Mortality.—It will be seen, by our weekly report, that the number of deaths in this city last week was unusually small—smaller than it has been in any one week, in March, since 1848. In 1849, for five weeks ending March 31st, the average weekly mortality was 95. Last year, for five weeks ending March 29, it was 73. The proportion of deaths by consumption, the last week, was unusually large, being about one third of the whole, and the number was greater than in the sickly spring of 1849. It would seem that the extensive use of the new remedies for this disease among us has not yet done much towards lessening its fatality. A more exact calculation, however, compared with the increase in our population, might show a more favorable result.

Varioloid—Anomalous Effects of Vaccination.—Dr. Jewett, of New Haven, Conn., reports to the editor the following curious case, an

explanation of which is rather perplexing even to those experienced in the disease.

"I was called, a few weeks since, to vaccinate a child who had been exposed for five days to the contagion from a very mild case of varioloid. I vaccinated the child on two successive days. Both of the vaccinations took well, and passed through their regular course, the child suffering but little except from the local affection. On the ninth day of the vaccination, the patient was taken with severe fever, which continued for about 24 hours, when she "broke out" with varioloid, and was quite sick for several days. The pustules were numerous, and were to be seen in the throat, nostrils, and inside of the mouth. Was this true varioloid? If so, had it remained dormant in the system during the period occupied by the vaccine disease? I would state that I have used the matter taken from the patient, in vaccinating several children since, and have found it to be of a good quality."

Medical Miscellany.—Henry Gibson, 101 years old, appeared at the celebration of Washington's birth-day, February 22, in New York.—Mr. Schneider, residing at Earnest town, Canada, is now 108 years of age, and cuts a cord of wood in a day.—An address before the Orleans County (Vt.), Medical Society, by Geo. A. Hinman, M.D., of sterling merit, has appeared in the Irasburg newspaper. It is a pity it had not been sent to a professional Journal, the proper organ for such articles.—Mrs. Bowls, of Cincinnati, Ohio, in February gave birth to four children.—A Mrs. Doane, of Tioga, N. Y., has recently had three children at one birth, a daughter and two sons. She had twins twice before.—A magnificent historical picture, of Ambrose Paré tying the first artery, on a field of battle, is being executed for the School of Medicine in Paris.—A cancer hospital, in London, is fully supplied with patients.—A kind of fever, bearing some resemblance to the spotted, has appeared in the northern part of Vermont.—Hiram Wilcox, of Dayton, Ohio, in assisting, about two weeks ago, to take a drunken man to jail, was bit by him on one of his fingers. He gave but little attention to it until a few days after, when it became swollen and painful, with every appearance of erysipelas. The ordinary remedies in such cases were applied, yet the inflammation spread rapidly from the hand to the arm, and finally to the body, growing worse and worse, until mortification put an end to his life.—The skeleton of part of the head and the tusk of an elephant has been found on Burlington Heights, Canada West, beneath the strata of stone and gravel.

TO CORRESPONDENTS.—The following communications have been received:—Case of Diseased Spleen in a Child; cases of Aberration in Dentition; a continuation of *Piorry on Fleximetry and Auscultation*; two cases of Obsolete Hemorrhage; case of *Distoma Hepaticum*.

DIED.—In Worcester, Ms., Dr. John Park, 78.—At Hebron, Conn., Dr. Daniel Arnold, 89.—At New London, Conn., Dr. Isaac Thompson, 76.—At New York, Dr. A. J. Rand, of ship fever, formerly of Massachusetts.

Deaths in Boston—for the week ending Saturday noon, March 13th, 55.—Males, 27—females, 28. Accidental, 1—disease of brain, 1—inflammation of brain, 2—consumption, 16—convulsions, 1—cancer, 1—dropsy, 3—dropsy of brain, 1—erysipelas, 1—typhus fever, 1—typhoid fever, 1—scarlet fever, 2—hooping cough, 3—disease of heart, 1—infantile, 3—inflammation of lungs, 8—disease of liver, 2—old age, 1—scrofula, 1—thrush, 1—teething, 1—tumor, 1—ulcer, 1—worms, 1.

Under 5 years, 17—between 5 and 20 years, 7—between 20 and 40 years, 19—between 40 and 60 years, 9—over 60 years, 3. Americans, 24; foreigners and children of foreigners, 31. The above includes 2 deaths at the City institutions.

Gun-shot Wound in a Child—Recovery.—Of all persons, children may be considered least liable to injuries of this kind, and only great and most unwarrantable imprudence, as an accident of a very uncommon character, could expose them to injuries which they seem so little fitted to bear. The following case, however, will show that a gun-shot wound, even of a very severe kind, may be perfectly recovered from.

Owing to the very brief notes which were forwarded to us by the kindness of Mr. Lloyd, and our narrow limits as to space, we are compelled to restrict the history of the accident to the mere statement, that the child, who was only about five years old, was admitted into Queen's Ward, under Mr. Lloyd, for a wound from a pistol loaded with ball. The patient had been struck in the lower part of the leg, and the different tissues were much bruised, and their vitality seriously impaired, by the passage of the bullet, which was firmly imbedded in the parts. It was, however, extracted as soon as possible; simple dressing was employed, and in the course of a short time the child recovered, and left the hospital with a perfectly sound limb.—*London Medical Gazette.*

Tumor in the Palm of the Hand.—Mr. Higginson showed to the Liverpool Medical Society a small tumor of a fibro-cartilaginous texture, which he had removed from the palm of a woman's hand. The patient was 40 years of age, and in 1845 had had a similar tumor removed from the same situation. The first tumor had resisted various escharotics; the wound healed kindly. In 1847, a large medullary tumor was removed from the axilla; and the tumor now shown to the Society was removed three months since.—*Id.*

Remarkable Case of Inanition.—The following extraordinary occurrence is detailed in a late number of the Kingston (Ky.) Republican :—

"On the 29th ult., a negro woman belonging to Mr. J. Harpending, of this county, got lost in the woods. Mr. H., thinking she had been stolen, offered a reward for her. He heard nothing of her until the 11th inst., when some boys who were hunting, found her, apparently dead. They returned home, and informed some gentleman of the fact. Messrs. B. W. Harpending, E. George, and one or two others, went in search of and found her, almost covered with snow; and supposing, as a matter of course, that she was dead, one of the party started to get a slide, while the others struck up a fire and awaited his return. One of them, wishing to see if decomposition had taken place, touched her with his cane, when, to his astonishment, she slightly moved her head. After applying the usual remedies she recovered sufficiently to converse with them. She stated that she had not eaten or drank anything but snow since she left home, and had been out in the weather all the time—fourteen days. She is in a fair way to recover. When she left home she was very fleshy, but when found, was perhaps the most emaciated creature ever seen alive. These facts can be substantiated by the testimony of some of the most respectable men of our county."

The papers mention a bill before the Legislature of New York, to compel apothecaries to attach a printed list of the ingredients of the medicines which they offer for sale. It is presumed the idea is to oblige them to do so with patent medicines.